

PUBLIC HEALTH SCREENING AT U.S. PORTS OF ENTRY

A Guide for Federal Inspectors:

U.S. Immigration and Naturalization Service

U.S. Customs Service

U.S. Department of Agriculture, APHIS

U.S. Fish and Wildlife Service

**U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
PUBLIC HEALTH SERVICE
CENTERS FOR DISEASE CONTROL AND PREVENTION
NATIONAL CENTER FOR INFECTIOUS DISEASES
DIVISION OF QUARANTINE**

REVISED MARCH 2000



**PUBLIC HEALTH SCREENING AT U.S. PORTS OF ENTRY
A Guide for Federal Inspectors**

The U.S. Public Health Service (PHS) has statutory and regulatory responsibility to prevent the introduction, transmission, and spread of communicable disease from foreign countries into the United States. Applicable regulations are found in 42 CFR, Parts 34 and 71. These responsibilities are delegated to the Centers for Disease Control and Prevention (CDC), National Center for Infectious Diseases, Division of Quarantine.

Quarantine Stations are located at eight major international airports; each Quarantine Station has responsibility for all ports in an assigned geographic area. You should know which Quarantine Station has jurisdiction over your port. Historically, PHS Quarantine Stations have been referred to in the port community simply as “PHS” or “Public Health.” As organizational names and assignments have changed over the years, that tradition has remained constant.

The Division of Quarantine is empowered to apprehend, detain, medically examine or conditionally release individuals (including U.S. citizens) suspected of having one of the following diseases:

T	Cholera and Suspected Cholera
T	Diphtheria
T	Infectious Tuberculosis
T	Plague
T	Suspected Smallpox
T	Yellow Fever
T	Suspected Viral Hemorrhagic Fevers, such as Lassa, Marburg, Ebola, Congo-Crimean, and others not yet isolated or named.

Foreign Quarantine regulations require that the death or illness of an arriving international passenger or

crew member be reported by the captain of the arriving ship or airplane to the Quarantine Station having responsibility for the port of entry; however, illnesses are not always reported. The following guidelines should be observed by all inspection personnel.

I. Inspection of Arriving Persons

Observe all arriving passengers and crew for signs and symptoms of illness, such as rash, unusually flushed or pale complexion, jaundice (unusual yellowing of skin and eyes), shivering, profuse sweating, diarrhea, and inability to walk without assistance.

A person is considered to be **ill** in terms of Foreign Quarantine regulations when signs/symptoms meet the following criteria:

1. Temperature of 100/ F (38/ C) or greater, which is accompanied by one or more of the following: rash, jaundice, glandular swelling, or which has persisted for 2 days or more.

2. Diarrhea severe enough to interfere with normal activity or work (three or more loose stools within 24 hours or a greater than normal number of loose stools).

Detain ill passengers and crew, and ask for details about symptoms and itinerary. At a port of entry where a Quarantine Station is staffed, that Station should be notified and a quarantine inspector will investigate. If there is no quarantine inspector at your port, the appropriate Quarantine Station should be notified. The Quarantine Station will release or conditionally release the ill person, or, if the circumstances warrant, call a physician to conduct an examination and recommend appropriate action.

II. Check Itineraries

It is sometimes necessary to check the itinerary of arriving persons *whether or not they are ill* because of a known communicable disease outbreak abroad. Specific itineraries may be connected with a need for appropriate preventive measures. If this situation should arise, CDC will direct that each arriving person be asked if he/she has been in the

infected country within a specified number of days. If so, the person will either be given printed information or referred to the appropriate Quarantine Station .

III. Health Alert Notice

A Health Alert Notice (Form CDC 75.8) provides general guidance for travelers arriving from areas where they may have been exposed to a communicable disease. When directed to do so, issue a Health Alert Notice to each arriving person or to each adult in a family group. A Health Alert Notice need not be issued to persons who routinely cross at U.S.-Mexican border and U.S.-Canadian border ports of entry.

IV. Medical Inspection of Arriving Aliens

The Immigration Act of 1996 revised the health-related grounds for inadmissibility under Section 212(a) of the Immigration and Nationality Act, as of September 30, 1996. Section 212(a) provides that any alien is inadmissible who (1) is found to have a communicable disease of public health significance, (2) fails to present documentation of having received vaccination against vaccine-preventable diseases, (3) has or had a physical or mental disorder with associated harmful behavior that poses or may pose a threat to the property, safety, or welfare of the alien or others, or (4) is a drug abuser or addict.

Medical Documents Missing or Incomplete: Inspectors should immediately advise the appropriate Quarantine Station when an immigrant arrives without medical documents or with incomplete medical documents.

X-rays: When processing an alien, DO NOT keep his/her chest X-ray film. This is an important medical document that the alien should retain as part of his/her permanent health record.

Medical Holds: Refer to the appropriate Quarantine Station all aliens for whom a “Medical Hold” should be issued. Candidates for a “Medical Hold” are:

- All aliens who are not routinely required to have a medical examination and who, upon arrival in the United States, exhibit a physical condition that may be inadmissible under Section 212(a) of the Immigration and Nationality Act.
- All aliens who are not routinely required to have a medical examination and who, upon arrival in the U.S., exhibit variations in behavior that may indicate a physical or mental disorder that may pose a threat to the property, safety or welfare of the alien or others, may be inadmissible under Section 212(a) of the Immigration and Nationality Act.
- All aliens who require a medical examination overseas (immigrants, refugees,

fiance[e]s of U.S. citizens and their minor children), but who arrive without evidence or with incomplete evidence of having had one performed, or with documentation that has expired. Satisfactory evidence can consist of a properly completed “Medical Examination of Applicants for United States Visas” (Optional Form 157), with results of chest X-ray and serologic tests for syphilis and human immunodeficiency virus (HIV) infection indicated. Chest X-ray and serologic tests are required for aliens 15 years of age and older.

The Class A or B Condition Stamp: All aliens with a Class A condition or a Class B condition, including tuberculosis, not infectious; and Hansen’s disease (leprosy), not infectious. These aliens should have a stamp imprinted on the face of their visa (OF-155A) as follows:

**Class A or Class B Condition
Requires Attention of**

Consular officers should stamp the OF-155A when an immigrant has a medical condition of public health concern, but sometimes this step is inadvertently omitted. The inspector should check all OF-157’s, regardless of whether the “Attention PHS” stamp is present.

Processing Aliens with Medical Conditions: When Quarantine Station personnel are not available to process aliens with these medical conditions, retain a copy of the OF-157. On the reverse side, write the alien’s U.S. address, sponsor’s name and address, arriving flight and date, port of entry, and the INS inspector’s name. A photocopy of the alien’s visa (OF-155A) is satisfactory in lieu of transcribing this information on the reverse of the OF-157, provided that the address is correct on the OF-155A and that the flight number and date of arrival are recorded on the OF-155A before the photocopy is made. The OF-155A and/or OF-157 with the requested information should be given, mailed, or sent by fax to the appropriate Quarantine Station.

Documentation of Class A Condition: If the alien has a Class A communicable disease of public health significance, copies of the OF-157, OF-155A, and both sides of the I-601 waiver application should be given or mailed to the appropriate Quarantine Station. The statements to be completed by waiver applicants who are HIV positive or who have Hansen’s disease will be affixed to the back of the I-601 waiver application by CDC Division of Quarantine staff. See IMMACT Wire #65 dated August 7, 1991, (not included in this handbook) for further information.

Harmful Behavior: If the alien has a Class A physical or mental disorder with associated harmful behavior, a copy of USPHS/CDC form 4.422-1, “Statements in Support of Application for Waiver”

should be given or mailed to the appropriate Quarantine Station, along with the OF-157, OF-155A, and I-601.

Drug Abuse or Addiction - No Waiver Provision: There is no waiver provision in the law for aliens applying for immigrant visas who are found under Section 212(a)(1)(A)(iv) to be inadmissible because of drug abuse or addiction. If an alien arrives with a visa indicating Class A drug abuse or addiction, please refer to the appropriate Quarantine Station.

Refugees and Asylees: Refugees and asylees normally arrive at ports where quarantine inspectors are assigned, but this may not always be the case. Notify the appropriate Quarantine Station of all refugees and asylees entering the United States for the first time. If a quarantine inspector is not available to process the refugee or asylee, you will be asked to obtain the following information, usually by making copies of documents carried by the refugee or asylee. This information is necessary to ensure that all refugees and asylees receive a health screening and any appropriate immunizations or treatment at the place of resettlement:

Name of Refugee	Address of Sponsor
Sex	Sponsor's Telephone
Date of Birth	Number
Country of Birth	Name of Sponsoring
Language Spoken	Agency
"A" Number	Date of Arrival
Name of Local Sponsor	Flight and Block Time

Parolees: Every effort should be made to determine the tuberculosis status of parolees prior to release and refer those who are suspected of having infectious tuberculosis to the appropriate Quarantine Station.

V. Importations of Public Health Importance

Animals

Of the animals commonly kept as pets, only dogs, cats, monkeys, and turtles are specifically mentioned in the Foreign Quarantine Regulations. Other species are not subject to PHS restrictions. The requirements of other agencies, such as the U.S. Department of Agriculture and the U.S. Fish and Wildlife Service, may also have an impact on the entry of pets into the U.S.

The general requirement is that all dogs, cats, monkeys, and turtles intended for importation into the United States shall be visually examined by inspecting personnel. Only those that are free of gross evidence of infectious diseases may be admitted. Animals that show signs of illness (e.g., emaciation, lesions of the skin, nervous system disturbances, jaundice or diarrhea) shall be examined, tested, or treated by a licensed veterinarian at the owner's expense. Contact the appropriate Quarantine Station when the above conditions are present. Specific requirements are as follows:

Cats

Cats are subject only to the general requirements for entry as stated above. No rabies vaccination or health certificate is required for entry.

Dogs

Regardless of age, dogs may be released without restriction if they appear to be healthy and have been exclusively in a rabies-free area for at least 6 months immediately preceding arrival or since birth. Dogs arriving from countries other than those listed as rabies-free may be admitted if they meet all of the following requirements:

- **Greater than 3 months of age**
- **Free of gross evidence of infectious disease**
- **Accompanied by a valid certificate of vaccination against rabies.**
 - This certificate shall:**
 - T **Identify the dog**
 - T **Be signed by a licensed veterinarian**
 - T **Specify the expiration date, which should not be earlier than the date of arrival; if the expiration date is not indicated on the certificate, it shall be valid for only 1 year from the date of issue.**
 - T **Specify the date of vaccination, which shall not be less than 30 days prior to the date of arrival.**

For a dog that is subject to the rabies vaccination requirement and appears to be healthy, but does not have a valid rabies certificate as outlined above, CDC form 75.37 must be completed and forwarded to the appropriate Quarantine Station for distribution. The form must be signed by the owner or agent. CDC 75.37 is to be prepared when:

- **The dog is greater than 3 months old and has no certificate:** Release the dog provided the owner agrees to place the dog in confinement immediately upon arrival at destination and have it vaccinated against rabies within 4 days. The dog must then be confined for an additional 30 days following vaccination. Confinement is defined as restriction of the animal to a building or other enclosure, in isolation from other animals and people, except for contact necessary for its care. If the dog is allowed out of the enclosure, the owner must muzzle the dog and use a leash.
- **The dog is greater than 3 months old and has a certificate showing a vaccination done less than 30 days prior to arrival:** The owner is required to confine the dog for the balance of 30 days.
- **The dog is less than 3 months old:** The owner is required to confine the dog until it is 3 months old, then have it vaccinated and confined for 30 additional days. A vaccination certificate presented for a puppy less than 3 months old cannot be accepted.

Monkeys and Other Nonhuman Primates

Pet Monkeys Banned: Live monkeys and other nonhuman primates may not be imported for use as pets under any circumstances. They may only be imported into the United States for bona-fide scientific, educational, or exhibition purposes. Importers must be registered with CDC, and are responsible for implementing specific disease control measures while the animals are imported and cleared, transported to the importer's facilities, and quarantined for a 31-day period. Registered importers must also hold a special permit, issued by CDC, to import cynomolgus, rhesus, or African green monkeys.

Verify Importer Status: Contact the appropriate Quarantine Station when primates are presented for entry to verify that the importer is currently registered as an importer of nonhuman primates and that, if required, a special permit has been issued.

Illegally Imported Monkeys: If a monkey owned by a passenger arrives hand-carried or as baggage, isolate the animal and call the Quarantine Station for advice immediately. **DO NOT** handle the animal or allow others near its enclosure.

Seizure: Inadmissible nonhuman primates are seized and re-exported to the country of origin, donated to facilities approved by CDC, or destroyed. Form CDC 75.10D is to be used.
Quarantine Station staff will provide guidance.

Animal Acts: Nonhuman primates that are part of a legitimate animal performing act may, if appropriately registered with CDC, be transported from and returned to the United States. The CDC registration for these acts is in the form of a letter on CDC letterhead; it grants re-importation privileges only for specific animals (i.e., no new primates may be imported as part of an animal act). The letter must be presented at the time of entry to satisfy CDC requirements for re-importation.

Turtles

Live turtles with a carapace (shell) length of *less than* 4 inches (measured in a straight line from front to back) and viable turtle eggs may *not* be imported into the United States for *commercial purposes*. An individual may import turtles of less than 4-inches in shell length only if the importation is *not* for *commercial purposes* and the importation includes no more than one lot containing fewer than seven live turtles, fewer than seven viable turtle eggs, or any combination thereof totaling fewer than seven. CDC may issue a permit for an importation of more than the permitted number when the importation is for a bona-fide noncommercial scientific or exhibition purpose.

CDC has no restrictions on the importation of live turtles with a carapace length of greater than 4 inches.

Goatskin Products from Haiti

Untanned goatskin products from Haiti may not be imported into the United States because they may carry anthrax. These items must be seized and incinerated. Precautions (gloves and mask, at a minimum) must be observed when goatskin products from Haiti are handled.

Human Remains

Examine the death certificate to determine the cause of death. Admit unless the person died of a quarantinable disease (cholera, plague, yellow fever, infectious tuberculosis, diphtheria, suspected smallpox, or suspected viral hemorrhagic fever), in which case the casket must be hermetically sealed. If there is no evidence that the casket is hermetically sealed, hold and contact the appropriate quarantine station for instructions. Ashes may be admitted without restriction, regardless of the cause of death.

Permits Required for Etiologic Agents and Vectors of Disease

It is impractical to list the several hundred species of etiologic agents and vectors for which a permit is required. The intent of the permit requirement is to control the importation of etiologic agents and vectors and ensure that permitted shipments are adequately packaged. Any shipment for which a permit has been issued may be immediately released. The following classes of imports require a permit issued by CDC:

- Any living insect or other living arthropod known to be or suspected of being infected with any disease transmissible to humans; also, if alive, any bedbugs, fleas, flies, lice, mites, mosquitoes, or ticks, even if uninfected. This includes eggs, larvae, pupae, and nymphs, as well as adult forms
- Any animal known to be or suspected of being infected with any disease transmissible to humans
- All live bats
- Unsterilized specimens of human and animal tissue (including blood), body discharges and excretions, or similar material, when known to be or suspected of being infected with disease transmissible to humans
- Any culture of living bacteria, virus, or similar organism known to cause or suspected of causing human diseases
- Any snails capable of transmitting schistosomiasis.

Note: Form CDC 75.41, “Denied Entry/Disposition” should be completed whenever an item is denied entry under Foreign Quarantine Regulations.

VI. Contact Information

All questions about application of these guidelines should be directed to the Quarantine Station having jurisdiction over your port of entry. A Quarantine Officer is on duty or on call at each Quarantine Station 24 hours per day, 7 days per week.

(contact information follows on the next page)

Quarantine Stations

Los Angeles, California

Los Angeles International Airport—LAX
380 World Way, Box N19
Los Angeles, CA 90045
310-215-2365
FAX: 310-215-2285
Officer-in-Charge: Michael J. Marty
All ports in the southern half of California; all ports in Arizona, Colorado, Texas and New Mexico; the entire U.S.–Mexico border; Las Vegas, NV

San Francisco, California

San Francisco International Airport—SFO
P.O. Box 280548 SFIA
San Francisco, CA 94128-0548
650-876-2872
FAX: 650-876-2796
Officer-in-Charge: Susan A. Dwyer
All ports in the northern half of California; Utah; Reno, NV

Miami, Florida

Miami International Airport—MIA
P.O. Box 996488
Miami, FL 33299-6488
305-526-2910
FAX: 305-526-2798
Officer-in-Charge: Anthony W. Drew
All ports in Florida, Puerto Rico, and the U.S. Virgin Islands

Atlanta, Georgia

Hartsfield Atlanta Int'l Airport—ATL
P. O. Box 45256
Atlanta, GA 30320
404-639-1220
FAX: 404-639-1224
Officer-in-Charge: Terrence D. Daley
All ports in Georgia, North Carolina, South Carolina, Tennessee, Alabama, Mississippi, and Louisiana

Honolulu, Hawaii

Honolulu Int'l Airport—HNL
300 Rodgers Boulevard, #67
Honolulu, HI 96819-1897
808-861-8530 or 8531
FAX: 808-861-8532
Officer-in-Charge: Robert Tapia
All ports in the State of Hawaii

Chicago, Illinois

O'Hare International Airport—ORD
P.O. Box 66012
Chicago, IL 60666-0012
773-894-2961 (12:00 N-8:00 PM Daily)
773-894-2960 (24-Hr. Ans. Service)
FAX: 773-894-2970
Officer-in-Charge: Martha S. Remis
All ports in Illinois, Indiana, Kentucky, Michigan, Minnesota, Missouri, Ohio, Pennsylvania (Erie), and Wisconsin; Toronto, Ontario, Canada

New York, New York

JFK International Airport—JFK
Room 2339 Int'l Arrivals Bldg.
Jamaica, NY 11430-1081
718-553-1685,6,7
FAX: 718-553-1524
Officer-in-Charge: Margaret A. Becker
All ports in Delaware, New Jersey, New York, Pennsylvania (except Erie), Connecticut, Maine, Vermont, Massachusetts, Rhode Island, New Hampshire, Maryland, Virginia; the District of Columbia; Montreal, Quebec, Canada

Seattle, Washington

Seattle-Tacoma Int'l Airport—SEA
Room S-212
Seattle, WA 98158-1720
206-553-4519

FAX 206-553-4455

Officer-in-Charge: Jenny Ansdell

*All ports in Idaho, Montana, North Dakota,
Oregon, Washington, Alaska; Vancouver, British
Columbia, Canada*

Headquarters

**Centers for Disease Control and Prevention
National Center for Infectious Diseases
Division of Quarantine (E-03)
Atlanta, Georgia 30333**

Program Operations Branch

James E. Barrow, Chief

Thomas A. DeMarcus

David F. Rogers

David K. Kim, M.D.

404-639-8107/8108

FAX 404-639-2599

Health Information for International Travel

The best and most complete source of health information for international travel is the CDC World Wide Web site:

<http://www.cdc.gov>

Other Travelers' Health Resources

Toll-Free 24-Hour Fax Hotline: To select information with touchtones to be sent via fax, dial
1-888-CDC-FAXX (1-888-232-3299)

To learn about disease outbreaks, to obtain publications, or to listen to messages about specific diseases,
dial 1-877-394-8747 (1-888-FYI-TRIP).

